



Athlete Burnout: Aiming to Limit the Sizzle and Fizzle in Sport

by Liz Hathaway, Ph.D., MPH; McKenzie Gregg, PA-C, MPH, DMS-c;
and Lauren Greenspoon, M.S., Ph.D.(c)

BURNOUT—WHAT IS IT AND WHY DO WE CARE?

What is athlete burnout? Athlete burnout is an extreme form of sport disillusionment, comprised of three symptoms that are different, but equivalent, to those in the work domain and include: (a) reduced sense of athletic accomplishment (*i.e.*, negative evaluation of one's sporting abilities and achievements), (b) devaluation of sport (*i.e.*, increased lack of caring and loss of interest with regard to sport participation), and (c) physical and emotional exhaustion (*i.e.*, perceived depletion of emotional and physical resources resulting from training and competition) (1,2). While there may be overlap, it is important to mention here that athlete burnout is a distinct phenomenon separate from depression and sport dropout (3,4). Compared to burnout's predominant (but not only) link to sport, depression is a more pervasive affective symptomology (5). While burnout causes some athletes to dropout, not all burned-out athletes will dropout (6). Additionally, dropout can have causes other than burnout (3).

Next logical question—how many athletes experience burnout? While it is likely underestimated due to burnout being a continuous phenomenon with no universally accepted or definitive cutoff points, prevalence rates of 2% to 6% in males and 1% to 9% in females (7–9) have been reported (10). Due to burnout's ongoing and evolving nature, burnout is likely to gradually develop over time with more athletes being susceptible to developing burnout over the course of an athletic season or athletic career (11). Supporting this notion, Silva asked athletes to

retrospectively think of their careers and reported that nearly half of the sample had experienced meaningful levels of burnout at least once during their careers (12). Athlete burnout itself is not fun, but that is not the whole story—burnout has been shown to be associated with underperformance, compromised physical and psychological well-being, and potential dropout from sport (7,13). Additionally, athletes with higher levels of burnout experienced greater health burdens including illnesses, acute injuries, and overuse injuries (10). Due to the importance of this topic, the aim of this column is to explore athlete burnout.

DIVING DEEPER

We are going to quickly mention three popular perspectives helpful in understanding the burnout phenomenon for all of our fellow nerds out there: stress-based, commitment-based, and motivational-based (11). From the stress-based perspective, Smith's (14) cognitive-affective model explains that burnout can develop as a consequence of chronic imbalance between an athlete's perceived training and situational demands and the athlete's resources to appropriately cope with the demands (4). We can all relate to experiencing the stress that comes from feeling that situational demands are greater than our resources to tackle them. Potential burnout occurs when athletes feel continuously underequipped to handle demands.

For the commitment-based perspective, we will look at two models. First, Raedeke's (6) commitment-based model explains that athletes can be involved in sport for multiple reasons related



to sport attraction (wanting to be involved) versus sport entrapment (having to be involved) (6). An athlete's views on sport enjoyment, sport costs, and negative aspects related to quitting lead to either greater feelings of sport attraction or sport entrapment (15). Potential burnout occurs when athletes feel greater degrees of sport entrapment. Second, Coakley (16) proposed that the social organization of sport impedes the development of multifaceted identities and instead promotes a unidimensional identity (athlete-only) (7). Coakley argues that an athlete-only identity plus a lack of control increases the risk of burnout.

Lastly, from the motivational-based perspective, Deci and Ryan's (17) self-determination theory explains that social environment characteristics are critical to fulfilling or thwarting basic psychological needs (*e.g.*, autonomy, relatedness, competence) (15). (Sidenote: we think self-determination is a crucial concept to understand and embrace when working with athletes and clients, so much so we previously wrote an article (18) on it for you to check it out if interested.) When all goes well and needs are satisfied (think happy face), athletes develop intrinsic motivation for their sport and greater optimal health (15). When needs are thwarted (think sad face), athletes develop less intrinsic motivation and decreased optimal health (15). Potential burnout occurs when athletes' needs are continuously thwarted.

WHO'S MORE AT RISK OF DEVELOPING BURNOUT?

OK, so we are in agreement burnout is not good—what do we know about who might be at higher risk of developing burnout as an athlete? Perfectionists, please stand up. More specifically, those with perfectionist concerns versus perfectionist strivings, please stand up. Perfectionistic concerns refers to concerns about making mistakes, fears of negative evaluation, and fears of experiencing rejection from others if the athlete does not perform perfectly (19). On the other hand, perfectionistic strivings refer to personal standards and self-oriented strivings for perfection (19). Perfectionistic concerns have been associated with greater burnout and burnout symptoms and shown to predict increase in burnout, while perfectionistic strivings have been associated with lower burnout and burnout symptoms and shown to predict decreases in burnout over time (20–22). These results indicate it is important to understand which type of perfectionism the athlete has, as not all perfectionism is created equally. We would be remiss if we did not mention a couple of other important variables. First, negative social interactions, including peer conflict and controlling behaviors from coaches, have been shown to be positively associated with burnout (23,24). Also, females, athletes later in their careers, and athletes with an injury history (specifically overuse) are most at risk for burnout (25).

HOW TO MEASURE AND MONITOR BURNOUT AND ITS SYMPTOMS

The Athlete Burnout Questionnaire (ABQ) is the go-to method of assessing athlete burnout which consists of a total of 15 questions, 5 connected to each burnout dimension (1). Athletes respond to each question using a 1 to 5 scale (almost never to al-

most always) where higher scores indicate more frequent symptoms (1,9). Questions like “I am not achieving much in my sport” assess reduced sense of athletic accomplishment, “I feel less concerned about being successful in my sport than I used to” assess sport devaluation, and “I am exhausted by the mental and physical demands of sport” assess physical and emotional exhaustion (1,9). While exercise professionals (*e.g.*, athletic trainers) could administer the ABQ, it is recommended that individuals within mental health and/or sport (*e.g.*, sport psychologist), or those with adequate training in assessments, administer and interpret the ABQ given their educational background and clinical experiences. A collaborative approach may be most helpful here to then provide the athlete with the most appropriate care (see below).

We, the peanut gallery, would like to chime in here—we agree with Madigan's suggestion to include not only frequency, which is currently assessed in the ABQ, but to also include intensity and duration questions (4). As Madigan showed, this could be easily added to the ABQ using 1 to 5 scales for intensity (very mild to very strong) and duration (no time to a very long time). It would likely be helpful to know how disruptive (intensity) the athlete's experience of burnout is in addition to how long they have been experiencing the symptoms. We believe this would provide greater insight into an athlete's current experience.

NOW WHAT? SPECIFIC STRATEGIES FOR...

Athletic and Exercise Professionals

With this information on burnout and its relevance among athletes, you are probably wondering, “So now what?” Let's consider the underlying components of burnout symptoms and how to potentially intervene from the position of an athletic or exercise professional. DeFreese and colleagues (3) described overtraining, sport-related stress, internal motivation, and aspects of sport (*e.g.*, athletic identity, enjoyment) as all important factors to take into account when understanding an athlete's experience of burnout. Once we have identified the area(s) that might be contributing to the athlete's burnout symptoms, we then need to consider the best place to intervene. Understanding the source of symptoms is crucial because that can help determine who may be the best fit to appropriately treat the athlete and what each of our roles may look like in a situation like this (see Mental Health and Mental Performance Professionals below). As athletic and exercise professionals, reducing the training demand in the weight room at peak season and emphasizing adequate recovery could be ways to intervene when athletes are experiencing burnout symptoms from overtraining (3). Similarly, encouraging athletes to develop strong social support inside and outside of their sport may be a helpful strategy when identifying that sport-related stress is underlying their burnout symptoms (3). To target an athlete's motivation, promoting autonomy, choice within sport, and developing relationships with other athletes could be helpful strategies to alleviate burnout symptoms (3). Finally, athletic and exercise professionals may encourage

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athletes to seek alternative activities outside of sport to develop other aspects of their identity, provide support, and emphasize the benefits of their sport as ways to target their burnout symptoms (3). A key part to targeting burnout symptoms in athletes is understanding what might be generating these symptoms and the various ways you can intervene as athletic and exercise professionals.

Mental Health and Mental Performance Professionals

Sometimes additional support is needed to help athletes successfully navigate burnout. Crucial reminder here at the beginning of this section: mental health professionals work with athletes and mental health concerns such as anxiety, depression, suicidal ideation, and disordered eating, whereas mental performance coaches/consultants only target athletes' performance-based concerns such as burnout symptoms, routines, imagery, and motivation. Based on the literature, here are some strategies that mental health and mental performance professionals may utilize when working with athletes. Research supports that reduction of stress among athletes who learned coping strategies through psychological skills training could minimize subsequent burnout symptoms (26). Additionally, observational designs exploring and understanding an individual's gratitude (27) and increasing one's self-regulation abilities (28) have shown support for reducing burnout symptoms through interventions despite the limited investigation among athletes (4). Identifying the relationship between one's thoughts, feelings, and behaviors through cognitive-based therapies such as cognitive behavioral therapy also may be a helpful approach to discovering altered beliefs at the center of one's burnout symptoms (7,29). Similarly, increasing one's awareness to the present moment and one's experiences without judgment (*i.e.*, mindfulness) may be a treatment to reduce burnout symptoms (30–32). Check out our recent article on mindfulness (33) if you are interested in learning more. While there is limited investigation into the efficacy of cognitive approaches for burnout symptoms in athletes, extensive support exists for these approaches with other specialty populations (*e.g.*, health-related workers, educators) (34). However, it is clear with the limited research among athletes that there is a gap from a treatment standpoint when considering this population experiencing burnout. Taken together, there are several treatment approaches that should be considered when working with athletes experiencing burnout symptoms, and intervening early on may be an advantageous step to take. With this in mind, we can view treatment from a more preventative lens: improve aspects in life before they become problematic, whether that is addressing burnout symptoms or much more. It is important for an athlete to know *who* can help with various treatment concerns, and that's where you come in.

Wrap-Up

We have covered a lot of ground in this article, and we now have a better grasp of burnout—what it is, three perspectives in which to better understand it, understanding who's more at risk of

dealing with it, how to monitor it, and strategies that professionals may utilize when working with affected athletes. Athletes who present as high risk or currently display characteristics of burnout should, ideally, be screened using the ABQ questionnaire to assess their starting point/baseline and then be periodically reevaluated once treatment strategies have been implemented. As athletic and exercise professionals, we have a unique opportunity to build positive relationships with our athletes and serve as a source of social support helping them reach their potential on the court/field and off it as well.

1. Raedeke TD, Smith AL. Development and preliminary validation of an athlete burnout measure. *J Sport Exerc Psychol*. 2001;23(4):281–306.
2. Smith A, Pacewicz C, Raedeke T. Athlete burnout in competitive sport. In: *Advances in Sport and Exercise Psychology*. Champaign (IL): Human Kinetics; 2019. pp. 409–24.
3. DeFreese JD, Raedeke T, Smith A. Athlete burnout: an individual and organizational phenomenon. In: *Applied Sport Psychology: Personal Growth to Peak Performance*. New York (NY): McGraw Hill; 2015. pp. 444–61.
4. Madigan DJ. Diagnosing problems, prescribing solutions, and advancing athlete burnout research. In: Zenko Z, Jones L, editors. *Essentials of Exercise and Sport Psychology: An Open Access Textbook*. Society for Transparency, Openness, and Replication in Kinesiology; 2021. pp. 664–82.
5. Cresswell SL, Eklund RC. The convergent and discriminant validity of burnout measures in sport: a multi-trait/multi-method analysis. *J Sports Sci*. 2006;24(2):209–20.
6. Raedeke TD. Is athlete burnout more than just stress? A sport commitment perspective. *J Sport Exerc Psychol*. 1997;19(4):396–417.
7. Gustafsson H, DeFreese JD, Madigan DJ. Athlete burnout: review and recommendations. *Curr Opin Psychol*. 2017;16:109–13.
8. Gustafsson H, Kenttä G, Hassmén P, Lundqvist C. Prevalence of burnout in competitive adolescent athletes. *Sport Psychol*. 2007;21(1):21–37.
9. Raedeke TD, Smith AL. *Athlete Burnout Questionnaire Manual*. Morgantown (WV): Fitness Information Technology; 2009.
10. Moseid NFH, Lemyre N, Roberts GC, Fagerland MW, Holm Moseid C, Bahr R. Associations between health problems and athlete burnout: a cohort study in 210 adolescent elite athletes. *BMJ Open Sport Exerc Med*. 2023;9(1):e001514.
11. Cresswell SL, Eklund RC. Changes in athlete burnout over a thirty-week "rugby year". *J Sci Med Sport*. 2006;9(1–2):125–34.
12. Silva JM. An analysis of the training stress syndrome in competitive athletics. *J Appl Sport Psychol*. 1990;2(1):5–20.
13. Madigan D, Gustafsson H, Smith A, Raedeke T, Hill A. The BASES expert statement on burnout in sport. *Sport Exerc Scientist*. 2019;61:6–7.
14. Smith RE. Toward a cognitive-affective model of athletic burnout. *J Sport Psychol*. 1986;8(1):36–50.
15. Madigan DJ, Olsson LF, Hill AP, Curran T. Athlete burnout symptoms are increasing: a cross-temporal meta-analysis of average levels from 1997 to 2019. *J Sport Exerc Psychol*. 2022;44(3):153–68.
16. Coakley J. Burnout among adolescent athletes: a personal failure or social problem? *Social Sport J*. 1992;9:271–85.
17. Deci EL, Ryan RM. *Intrinsic Motivation and Self-Determination in Human Behavior*. New York: Springer; 1975.
18. Hathaway L, Gregg M. Wielding the power of self-determination theory. *ACSM's Health Fit J*. 2021;25:38–40.
19. Stoeber J, Madigan DJ. Measuring perfectionism in sport, dance, and exercise: Review, critique, recommendations. In: *The Psychology of Perfectionism in Sport, Dance and Exercise*. New York (NY): Routledge/Taylor & Francis Group; 2016. pp. 31–55.
20. Hill AP, Curran T. Multidimensional perfectionism and burnout: a meta-analysis. *Pers Soc Psychol Rev*. 2016;20(3):269–88.

21. Madigan DJ, Stoeber J, Passfield L. Perfectionism and burnout in junior athletes: a three-month longitudinal study. *J Sport Exerc Psychol*. 2015;37(3):305–15.
22. Madigan DJ, Stoeber J, Passfield L. Perfectionism and changes in athlete burnout over three months: interactive effects of personal standards and evaluative concerns perfectionism. *Psychol Sport Exerc*. 2016;26:32–9.
23. Barcza-Renner K, Eklund RC, Morin AJ, Habeeb CM. Controlling coaching behaviors and athlete burnout: investigating the mediating roles of perfectionism and motivation. *J Sport Exerc Psychol*. 2016; 38(1):30–44.
24. Smith AL, Gustafsson H, Hassmén P. Peer motivational climate and burnout perceptions of adolescent athletes. *Psychol Sport Exerc*. 2010; 11(6):453–60.
25. Giusti NE, Carder SL, Wolf M, et al. A measure of burnout in current NCAA student-athletes. *Kans J Med*. 2022;15:325–30.
26. Birrer D, Morgan G. Psychological skills training as a way to enhance an athlete's performance in high-intensity sports. *Scand J Med Sci Sports*. 2010;20(Suppl 2):78–87.
27. Gabana NT, Steinfeldt J, Wong YJ, Chung YB, Svetina D. Attitude of gratitude: exploring the implementation of a gratitude intervention with college athletes. *J App Sport Psychol*. 2019;31(3):273–84.
28. Dubuc-Charbonneau N, Durand-Bush N. Moving to action: the effects of a self-regulation intervention on the stress, burnout, well-being, and self-regulation capacity levels of university student-athletes. *J Clin Sport Psychol*. 2015;9:173–92.
29. Wilczy ska D, Qi W, Jaenes JC, Alarcón D, Arenilla MJ, Lipowski M. Burnout and mental interventions among youth athletes: a systematic review and meta-analysis of the studies. *Int J Environ Res Public Health*. 2022;19(17):10662.
30. Andersen MB. In: Andersen MB, editor. *Sport Psychology in Practice* vol. xiii. Champaign (IL): Human Kinetics; 2005. p. 338-xiii.
31. Kabat-Zinn J. Mindfulness-based interventions in context: past, present, and future. *Clin Psychol: Sci Pract*. 2003;10(2):144–56.
32. Suleiman-Martos N, Gomez-Urquiza JL, Aguayo-Estremera R, Cañadas-De La Fuente GA, De La Fuente-Solana EI, Albendín-García L. The effect of mindfulness training on burnout syndrome in nursing: a systematic review and meta-analysis. *J Adv Nurs*. 2020;76(5):1124–40.
33. Hathaway L, O'Shields B. Mindfulness: learning to surf. *ACSMs Health Fit J*. 2024; 28(6):40–3.
34. West CP, Dyrbye LN, Erwin PJ, Shanafelt TD. Interventions to prevent and reduce physician burnout: a systematic review and meta-analysis. *Lancet*. 2016; 388(10057):2272–81.

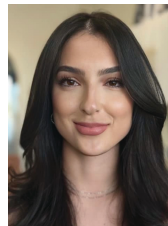
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Liz Hathaway, Ph.D., MPH, is a UC Foundation associate professor in Health and Human Performance (HHP) at the University of Tennessee at Chattanooga, TN. She teaches Health Behavior Change and Psychology of Sport and Exercise in the Exercise and Health Sciences undergraduate program and serves as the program coordinator for the Healthy Eating and Active Living Through HHP Residential Learning Community for HHP freshmen. Beginning fall of 2022, she decided to do the unthinkable and moved into a freshman residence hall to serve as a faculty-in-residence. Her interests include learning how to best motivate individuals, especially college students, to make lasting positive behavior change. Her dislikes include blaring fire alarms at 2 a.m.



McKenzie Gregg, PA-C, MPH, DMS-c, is a physician assistant currently specializing in adult and pediatric emergency medicine. She will be graduating with her Doctorate of Medical Science—General Medicine degree in December 2024. She has played soccer at multiple levels and continues her love of sport through coaching the upcoming generation. She plans to continue serving people through medicine and sport, both with her current population and through mission work overseas. In her spare time, she enjoys being with family, consuming coffee, verbal jousting, and sleeping.



Lauren Greenspoon, M.S., Ph.D.(c), is a doctoral candidate in the Counseling Psychology Doctoral Program at the University of Southern Mississippi. As a former Division I volleyball player at the University of Tennessee—Chattanooga, she is eager to give back to the athletic community and work as a sport psychologist. She is a lover of all things sweet, coffee, deep laughs with good company, and Wheel of Fortune.